03/13/2008 16:26

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Χ Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 02 0 1 2008 02 29 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 03 13 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC [®] D ^UD 0 2 0.2 29 0 1 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1507360.96 January 1 (b) Cash on Hand at 1403164.72 Begining of Reporting Period 99654.65 126300.65 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1502819.37 1633661.61 6(a) and 6(c) for Column B) 112185.71 243027.95 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1390633.66 1390633.66 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	7230.24	17930.24
(ii) Unitemized	7758.13	12682.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14988.37	30612.69
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	14988.37	30612.69
Transfers From Affiliated/Other Party Committees	77700.00	77700.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	6500.00	17000.00
7. Other Federal Receipts (Dividends, Interest, etc.)	466.28	987.96
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	99654.65	126300.65
Total Federal Receipts (subtract Line 18(c) from Line 19)	99654.65	126300.65

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To:

Individuals/Persons Other

(b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

(a) Shared Federal Election Activity

(i) Federal Share

(ii) "Levin" Share

With Federal Funds (c) Total Federal Election Activity (add

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) and Line 30(a)(ii)

32. Total Federal Disbursements

from Line 31).....

(from Schedule H6)

Than Political Committees

23.

(c) Total Operating Expenditures

21. Operating Expenditures:

of Disbursements Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... 320.71 41587.95 Expenditures..... 320.71 41587.95 (add 21(a)(i), (a)(ii) and (b))............ 0.00 0.00 Committees..... Federal Candidates/Committees.....and Other Political Committees..... 111500.00 200375.00 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 365.00 565.00 0.00 0.00 0.00 0.00 (such as PACs) 365.00 565.00 (add Lines 28(a), (b), and (c)) 0.00 500.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) 0.00 0.00 0.00 0.00 (b) Federal Election Activity Paid Entirely 0.00 0.00 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 112185.71 243027.95

112185.71

243027.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	14988.37	30612.69
34.	Total Contribution Refunds (from Line 28(d))	365.00	565.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	14623.37	30047.69
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	320.71	41587.95
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	320.71	41587.95

FE6AN026

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 41 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Hospital Association F	and Statements may not be sold or used by any persoing the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Martin G. Oscadal Mailing Address 1815 Farm Hosp	ital Way	Date of Receipt
City Florence	State Zip Code KY 41042	Transaction ID: 15024717 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer St. Elizabeth Medical Center-Grant Cou Receipt For: Primary General Other (specify) ▼	Occupation V.P. Human Resources Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Nancy Foster Mailing Address 10005 Leafy Ave	nue	Date of Receipt
City	State Zip Code	0 2 0 7 2 0 0 8 Transaction ID: 15024723
Silver Spring FEC ID number of contributing federal political committee.	MD 20910-1021	Amount of Each Receipt this Period 500.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Quality & Patient Safe Aggregate Year-to-Date 500.00	e
Full Name (Last, First, Middle Initial) Ms. Kathleen D. Sanford, RN, DBA Mailing Address 2659 Syracuse (Court	Date of Receipt
City	State Zip Code	0 2 0 4 2 0 0 8 Transaction ID: 15028104
Denver FEC ID number of contributing federal political committee.	CO 80238-2421	Amount of Each Receipt this Period 500.00
Name of Employer Catholic Health Initiativ- es	Occupation Senior Vice President & CNO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (opti	onal)	1300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 41 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Jane Llewellyn Mailing Address 1753 West Congre	ess Parkway		Date of Receipt
City Chicago	State	Zip Code 60612-3809	Transaction ID: 15032362 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		210.00
Name of Employer Rush University Medical Center Receipt For: Primary General Other (specify) ▼		n rsing Officer e Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Ms Stephanie Doughty Mailing Address 1024 South Lemay	/ Avenue		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15033240
Fort Collins	CO	80524-3998	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Poudre Valley Health Syst- em	Occupation Chief Fin	n ancial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Rita M. Turley, MS, RN	•		Date of Receipt
Mailing Address 351 Morningside L	ane North		02 20 2008
City	State	Zip Code	Transaction ID: 15061931
Billings FEC ID number of contributing federal political committee.	C	59105-2873	Amount of Each Receipt this Period 500.00
Name of Employer Sisters of Charity of Lea- venworth Heal	Occupation Presiden	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)		1210.00

SCHEDULE A (FEC Fori	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 41 (check only one) X 11a 11b 11c 12
Any information copied from such Rep	orts and Statements may not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Associatio		Solicit contributions from Such committee.
Full Name (Last, First, Middle Initia Ms. Audrey M. White)	Date of Receipt
Mailing Address 25 Concord S		02 19 2008
City	State Zip Code	Transaction ID: 15063394
<u>Peterborough</u>	NH 03458-1510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Monadnock Community Hospi- tal	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initia Mr. Marc D. Smith)	Date of Receipt
Mailing Address 5612 Tanner I	Bridge Road	0 2 1 4 2 0 0 8
City	State Zip Code	Transaction ID: 15078639
Jefferson City	MO 65101-8275	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.12
Name of Employer Missouri Hospital Associa- tion	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	222.24	
Full Name (Last, First, Middle Initia Mr. Dwight L. Fine)	Date of Receipt
Mailing Address 12675 Riviera	Heights Road	02 14 2008
City	State Zip Code	Transaction ID: 15078640
Holts Summit	MO 65043-2039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.12
Name of Employer Missouri Hospital Associa- tion	Occupation Sr. Vice President, Health Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	222.24	
	optional)	572.24

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 41 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Ms. Julianne F. Haefeli, MD			Date of Receipt
Mailing Address 2008 18th Avenue			02 20 2008
City Greeley	State CO	Zip Code 80631-6845	Transaction ID: 15078644 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Poudre Valley Health Syst- em	Occupatio Trustee	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. James G Parrish, , FACHE	L		Date of Receipt
Mailing Address 9550 Alice Lane			02 27 2008
City Winnemucca	State NV	Zip Code	Transaction ID: 15117304
FEC ID number of contributing federal political committee.	C	89445-3299	Amount of Each Receipt this Period 500.00
Name of Employer Humboldt General Hospital	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	- 1 '	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Fred Hipp, Jr.			Date of Receipt
Mailing Address 401 Route 73 North 50 Lake Center Driv			02 29 2008
City Marlton	State NJ	Zip Code 08053-3424	Transaction ID: 15117420 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00000 0424	500.00
Name of Employer Virtua Health	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 41 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Mark D Pilla		Date of Receipt
Mailing Address 99 Route #37 West	State 7in Code	02 29 2008
City Toms River	State Zip Code NJ 8755	Transaction ID: 15117431 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Saint Barnabas Health Care System Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date ▼ 500.00	_
Full Name (Last, First, Middle Initial) Ms. Dawn M. Bach		Date of Receipt
Mailing Address 1525 West 5th Street PO Box 309		02 26 2008
City	State Zip Code	Transaction ID: 15117699
Storm Lake	IA 50588-3027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Buena Vista Regional Medi- cal Center	Occupation Director of Clinical Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Sarah B. Buck		Date of Receipt
Mailing Address 2052 Pinehurst Drive		02 28 YYYYY 2008
City	State Zip Code	Transaction ID: 15117715
Ames	IA 50010-4561	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Mary Greeley Medical Cent- er	Occupation Trustee & Board Chair	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1350.00
TOTAL This Period (last page this line number		

SCHEDULE ITEMIZED F	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 41 (check only one) X
or for commercial NAME OF CO	opied from such Reports and St purposes, other than using the MMITTEE (In Full) ospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Richard T F Mailing Addres City North Adam	st, First, Middle Initial) Palmisano, II, R.N. ss 71 Hospital Avenue	State MA	Zip Code 01247-2504	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Empl North Adams ital Receipt For:		_	n t and Chief Executive Office e Year-to-Date 500.00	500.00 r
Full Name (La: Ms. Joan Herbe Mailing Addres		State	Zip Code	Date of Receipt 0 2 2 7 2 0 0 8
Charleston		SC C	29403-5836	Transaction ID: 15117754 Amount of Each Receipt this Period 250.00
MUSC Medica dical Univers Receipt For: Primary	General	Administ	rator, Institute of Psychiatry Year-to-Date 250.00	
Full Name (La: Gayle Jensen-S Mailing Addres				Date of Receipt 0 2 2 7 2 0 0 8
City		State	Zip Code	Transaction ID: 15118391
<u>Dallas</u> FEC ID numbe federal politica	er of contributing Il committee.	C	75229-5436	Amount of Each Receipt this Period 350.00
Name of Empl Presbyterian F	oyer Hospital of		Behavioral Health	
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of F	Receipts This Page (optional)			1100.00

В.

SCHEDULE A (FEC Form 3X	(3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 41 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any pers ress of any political committee t	con for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC	;		
Full Name (Last, First, Middle Initial) Mr. Alex White, Jr.			Date of Receipt
Mailing Address One North Franklin			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1339349920214
Chicago	IL	60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		174.00
Name of Employer American Hospital Associa- tion	Occupation Account E		
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 290.00	P/R Deduction (\$58.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Alexander R. White, Sr.	'		Date of Receipt
Mailing Address PO Box 15587			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR331416020214
Austin	TX	78761-5587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		174.00
Name of Employer American Hospital Associa- tion	Occupation Regional		
Receipt For:	Aggregate '	Year-to-Date ▼	
Primary General Other (specify) ▼		290.00	P/R Deduction (\$58.00 Bi- Weekly)

		240.00
SUBTOTAL of Receipts This Page (optional)	•	348.00
TOTAL This Period (last page this line number only)		7230.24

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 41 (check only one) 11a 11b 11c 12 13 14 15 16 17
, c	any information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAC		Date of Receipt
	Mailing Address One Empire Drive		02 11 7 2008
	City	State Zip Code NY 12144	Transaction ID: 15033689
	Rensselaer FEC ID number of contributing federal political committee.	NY 12144 C C00160259	Amount of Each Receipt this Period 15000.00
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 15000.00	
— В.	Full Name (Last, First, Middle Initial) North Carolina Hospital Assoc. HOSPAC - Feder	I al	Date of Receipt
	Mailing Address Post Office Box 4449		02 25 2008
	City	State Zip Code	Transaction ID: 15118392
	Cary FEC ID number of contributing federal political committee.	NC 27519-4449 C C00194647	Amount of Each Receipt this Period 52700.00
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 52700.00	
_ С.	Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal		Date of Receipt
	Mailing Address Post Office Box 8600		02 26 YYYYY 26 2008
	City	State Zip Code	Transaction ID: 15150453
	Harrisburg FEC ID number of contributing federal political committee.	PA 17105-8600 C C00128082	Amount of Each Receipt this Period 10000.00
	Name of Employer	Occupation	7
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	
	SUBTOTAL of Receipts This Page (optional)		77700.00
	TOTAL This Period (last page this line number	· · · · · · · · · · · · · · · · · · ·	77700.00

CHEDULE A (FEC Form 3X) "EMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 14 / 41 (check only one) 11a 11b 11c 12 13 14 15 X 16	
ny information copied from such Reports and r for commercial purposes, other than using the	Statements may	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Harry Mitchell For Congress			Date of Receipt
Mailing Address PO Box 23748			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15124256
Tempe	AZ	85285	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C0	0421271	1000.00
Name of Employer	Occupatio	n	7
Receipt For: 2008	Aggregata	e Year-to-Date ▼	\dashv
X Primary General	Aggregate		Refund
Other (specify) ▼	0 0	1000.00	neiulia
Full Name (Last, First, Middle Initial) Citizens For Altmire			Date of Receipt
Mailing Address PO Box 1776			02 13 7 9 9 9
City	State	Zip Code	Transaction ID: 15124258
Freedom	PA	15042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C0	0413310	5000.00
Name of Employer	Occupatio	n	
Receipt For: 2008	Aggregate	e Year-to-Date 🔻	\dashv
X Primary General	Aggregate	1 1 1 1 1 1 1	Refund
Other (specify) ▼		5000.00	I Holdrid
Full Name (Last, First, Middle Initial) Ron Lewis For Congress	<u> </u>		Date of Receipt
Mailing Address PO Box 307			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15150455
Elizabethtown	KY	42702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C0	0304527	500.00
Name of Employer	Occupatio	n	7
	Aggregate	e Year-to-Date V	_
Receipt For: 2008	ggroguit		_ 1
Receipt For: 2008 X Primary General	00 0	500.00	Refund
		500.00	Refund
X Primary General		0 0 0 0 0 0 0	Refund 6500.00

SCHEDULE A (FEC Form 3X	()		FOR LINE NUMBER: PAGE 15/41
ITEMIZED RECEIPTS	-,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 X 17
Any information copied from such Reports an or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
Mailing Address 1400 G Street, NW			02 29 2008
City	State	Zip Code	Transaction ID: 15130000
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		466.28
Name of Employer	Occupatio	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		987.96	Bank Interest

		100.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	466.28
TOTAL This Period (last page this line number only)	•	466.28

В.

Senate

District:

President

19e# 20330332004										
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate sch	nedule(s)	OR LINE	NUMBEF	R:	F	PAGE	16 / 4	1	
TEMIZED DISBURSEMENTS	Detailed Summar		21b 27	22 28a	23 28b	24 28	_c [25 29		26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full) American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Merchant Bankcard					ction ID: Disburse		V .	/ * Y	Y	
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
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Full Name (Last, First, Middle Initial) Texans For Henry Cuellar Congressional	Campaign		Transaction ID: 15078838 Date of Disbursement
Mailing Address 1519 Washington Stree 2nd Floor Suite 200			02 07 2008
City Laredo	State Zip Code TX 78042		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Henry Cuellar		Category/ Type	
Senate President	ement For: 2008 Primary General Other (specify)		Contribution
State: TX District: 28 Full Name (Last, First, Middle Initial)			
Moran For Kansas			Transaction ID: 15078848 Date of Disbursement
Mailing Address P.O. Box 1151			02 14 2008
City Hays	State Zip Code KS 67601		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Jerry Moran		Category/ Type	
	ement For: 2008 Primary General Other (specify)		Contribution
Full Name (Last, First, Middle Initial) Moran For Kansas			Transaction ID: 15078850 Date of Disbursement
Mailing Address P.O. Box 1151			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Hays	State Zip Code KS 67601		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	500.00
Candidate Name Rep. Jerry Moran		Category/ Type	
Senate President	ement For: 2008 Primary X General Other (specify)		Contribution
State: KS District: 01			0500.00
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Mailing Address PO Box 50100					02	′	^D 1	^D 4	Υ	ž 0 ŏ	8 ^Y
City Springfield	State Zip Code MO 65805			Aı	mount	of	Each	Disburs	eme	ent this	Period
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Anna Eshoo For Congress					ate of	Dis	burse		852	2	
Mailing Address 555 Capitol Mall Suite 1	425				0 2	_ ′	^D 1	4 /	Y	žoŏ	8 ^Y
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Bob Filner For Congress				D	ate of		burse	ement			V
Mailing Address P.O. Box 127868					0 2] ′	^D 1	^D 4	<u>'</u>	ž o ŏ	8
City San Diego	State Zip Code CA 92112			Aı	mount	of	Each	Disburs	eme	ent this	Period
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NAME OF COMMITTEE (In Full) American Hospital Association P	AC		
Full Name (Last, First, Middle Initial)			Transaction ID: 15078856
Committee To Elect McHugh			Date of Disbursement
Mailing Address 228 South Was Suite 115	shington Street		02 14 2008
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Perio
Purpose of Disbursement			1000.00
Contribution		011	
Candidate Name Rep. John M. McHugh		Category/ Type	
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State: NY District: 23			
Full Name (Last, First, Middle Initial)			Transaction ID: 15078859
Committee To Elect McHugh			Date of Disbursement
Mailing Address 228 South Was Suite 115	shington Street		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Perio
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	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LIN	E NUMBER: PAGE 27 / 41
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 29 30 28a 28b 28c 29 30
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
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	Full Name (Last, First, Middle Initial) New Democrat Coalition Political Action Coalition	ommittee		Transaction ID: 15078841 Date of Disbursement
	Mailing Address 607 14th Street NW Suit	e 800		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
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	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Туре	2008 Contribution
3.	Full Name (Last, First, Middle Initial) Friends of John Barrasso			Transaction ID: 15078845 Date of Disbursement
	Mailing Address 6896 Casper Mountain F	load		02 14 7 2008
	City Caster	State Zip Code WY 82601		Amount of Each Disbursement this Period
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	Office Sought: House Disburse X Senate President State: WY District:	ement For: 2008 Primary X General Other (specify)		Contribution
	Full Name (Last, First, Middle Initial) Citizens To Elect Rick Larsen			Transaction ID: 15078878 Date of Disbursement
	Mailing Address PO Box 326			02 7 2 1 7 2 0 0 8
	City Everett	State Zip Code WA 98206		Amount of Each Disbursement this Period
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	Candidate Name Rep. Rick Larsen		Category/ Type	
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam					
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٠.	Full Name (Last, First, Middle Initial) Friends Of Rosa Delauro					Transaction ID: 15078877 Date of Disbursement
	Mailing Address 49 Huntington Street					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City New Haven	State Zip Code CT 06511				Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		Г	0.	11	1000.00
	Candidate Name Rep. Rosa L. DeLauro		Ca	_	gory/	
		ement For: 2008 Primary General Other (specify)				Contribution
	Full Name (Last, First, Middle Initial) Friends Of Senator Carl Levin					Transaction ID: 15078881 Date of Disbursement
	Mailing Address 10 G Street Ne, Suite 47	70				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Washington	State Zip Code DC 20002				Amount of Each Disbursement this Period
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	Sen. Carl Levin			Ту		
	X Senate President	ement For: 2008 Primary X General Other (specify)				Contribution
	State: MI District: Full Name (Last, First, Middle Initial) People For English					Transaction ID: 15078882 Date of Disbursement
	Mailing Address PO Box 1940					0 2
	City Erie	State Zip Code PA 16507				Amount of Each Disbursement this Period
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	Candidate Name Rep. Phil English		Ca	_	gory/	
	Senate President	ement For: 2008 Primary X General Other (specify)			-	Contribution
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SCHEDIII F B (FFC Form 3Y)

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	ny Information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Nunes For Congress			Transaction ID: 15078880 Date of Disbursement
	Mailing Address PO Box 891			02 0 08
	City Pixley	State Zip Code CA 93256		Amount of Each Disbursement this Period
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	Candidate Name Mr. Devin Nunes		Category Type	y/
	Office Sought: X House Disbustion	rrsement For: 2008 X Primary General Other (specify) ▼		Contribution
	Full Name (Last, First, Middle Initial) Cathy McMorris For Congress			Transaction ID: 15078879 Date of Disbursement
	Mailing Address Box 137			02 0 0 8
	City Spokane	State Zip Code WA 99210		Amount of Each Disbursement this Period
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	Candidate Name Rep. Cathy McMorris Rodgers		Category Type	y/
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-	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress			Transaction ID: 15078876 Date of Disbursement
	Mailing Address P.O. Box 45706			02
	City Philadelphia	State Zip Code PA 19149		Amount of Each Disbursement this Period
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	Candidate Name Rep. Allyson Y. Schwartz		Categor	y/
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	Rep. Joseph Sestak	1		Type	
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Ī	Mailing Address P.O. Box 777				$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z & D \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & N \\ Z & D & Q & N & N \end{bmatrix}$
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	Rep. Steve J. Israel				
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; ;	Office Sought: X House Senate President State: NY District: 02 Full Name (Last, First, Middle Initial) Tim Bishop For Congress	X Primary	General		Transaction ID: 15116451 Date of Disbursement O 2 D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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↓_ 4 .	Full Name (Last, First, Middle Initial) Friends Of Bill Posey					Transaction ID: 15124259 Date of Disbursement							
	Mailing Address 1824 South Fiske Boulev	ard /				0 2	M /	^D 2	2 /	ž	8 Ó C	Y	
	City Rockledge	State Zip Code FL 32955				Amou	ement	this P	eriod				
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_	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	151171	48			
3.	Stupak For Congress					Date o							
	Mailing Address 817 Ninth Avenue PO Box 143					0 2	ž	8 Ó C	Y				
	City Menominee	State Zip Code MI 49858				Amou	nt of I	ement	this P	eriod			
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	Candidate Name Rep. Bart Stupak		С	ateg Typ	•								
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 c.	Full Name (Last, First, Middle Initial) Friends Of Blanche Lincoln					Trans Date o			151164 ment	155			
	Mailing Address PO Box 3197					0 2	M /	^D 2	6 / C	ž	8 ŏ c	Y	
	City Little Rock	State Zip Code AR 72203				Amou	nt of I	Each	Disburse				
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Mailing Address P.O.	Box 15703				02	^D 26	Ž	0 0 8
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Candidate Name Rep. Tammy Baldwin				egory/ ype				
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	Candidate Name Rep. Robin C. Hayes			ateg Typ	•									
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